## Summary of Benefits Report for Illinois, Medicaid InsureKidsNow.gov

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<b>Preventive Service</b>	es			
	Is the service Covered?	Frequency	List any service - specific limitations	
Cleanings	Yes	1 x 6 months		
Fluoride treatments (including fluoride varnishes)	Yes	1 x 6 months		
Sealants (list any tooth-specific limits)	Yes	1 x lifetime		
Space maintainers	Yes	1 x lifetime		
<b>Diagnostic Servic</b>	es			
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Oral health screening or assessment	No			
Dental examinations	Yes	1 x 6 months		2
Assessment of risk for tooth decay	No			
X-Rays				1
Bitewing	Yes	1 x year		
Full Mouth	Yes	1 x every 3 years		
Panoramic	Yes	1 x every 3 years		
<b>Treatment Service</b>	es			
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Anti-microbial treatments that stop decay from spreading	No			
Fillings			•	
Silver amalgam	Yes			
Tooth colored composite	Yes			
Crowns/tooth caps				
Stainless steel crowns	Yes - only with prior authorization			
Metal (only) crowns	Yes - only with prior authorization			
Metal/porcelain crowns	Yes - only with prior authorization			
Porcelain (only) crowns	Yes - only with prior authorization			
Root Canals (endodo	ntics)			T
Root canals on baby teeth (pulpotomies)	Yes			
Root canals on permanent teeth	Yes			
Gum (periodontal) therapy	Yes - only with prior authorization			
Dentures	-			1
Partial dentures	Yes			
Complete dentures	Yes - only with prior authorization			

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Traction and Campian						
Treatment Services						
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
Bridges	Yes - only with prior authorization					
Orthodontics*						
Retainers (orthodontic)	Yes - only with prior authorization					
Braces	Yes - only with prior authorization					
Oral surgery						
Simple extractions	Yes					
Surgical extractions	Yes - only with prior authorization					
Care of abscesses	Yes - only with prior authorization					
Cleft palate treatment	Yes					
Cancer treatment	Yes - only with prior authorization					
Treatment of fractures	Yes - only with prior authorization					
Biopsies	No					
Treatment of jaw joint problems (TMJ)	No					
Emergency room services provided by a dentist	Yes					
Inpatient Hospital Services	Yes					
Anesthesia						
General anesthesia	Yes - only with prior authorization					
Intravenous conscious sedation	Yes - only with prior authorization					
Non-intravenous conscious sedation	Yes - only with prior authorization					
Analgesia (nitrous oxide)	Yes					

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<sup>\*</sup> When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).